POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*AB*	= =	08-08-0
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		1020	09/12/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
– (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim Final	Original	Date						
	1	✔						
	2	✔						
	3							
	4							
	5							
	6	✔						
	7	N						
	8	N						
	9	N						
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	11	✔						
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	50	✔	N					

Claim Final	Original	Date						
	51	✔	N					
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Claim Final	Original	Date						
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If more than 150 claims or 10 actions
staple additional sheet here

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